-III in this inforn	nation to identify your ca	ase and this min			
Debtor 1	Thomas J. Chek First Name	Middle Name	Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name		
		NORTHERN DIS	STRICT OF CALIFORNIA, SAN FRANCIS	СО	
_	- -	DIVISION			_
Case number _	18-30006				☐ Check if this is a amended filing
Schedul n each category, s nink it fits best. B	e as complete and accurate e space is needed, attach a	items. List an asse as possible. If two	et only once. If an asset fits in more than on o married people are filing together, both ar this form. On the top of any additional page	e equally responsible for sup	pplying correct
		Land an Other Day			
alt I. Describe	Each Residence, Building,	Land, or Other Rea	al Estate You Own or Have an Interest In		
			al Estate You Own or Have an Interest In idence, building, land, or similar property?		
	ave any legal or equitable				
. Do you own or h	ave any legal or equitable				
Do you own or h	ave any legal or equitable				
Do you own or h ☐ No. Go to Par ☐ Yes. Where is	ave any legal or equitable	interest in any resi	idence, building, land, or similar property?		
Do you own or h No. Go to Par Yes. Where is	ave any legal or equitable it 2.	interest in any resi		Do not deduct secured cla	aims or exemptions. Put
Do you own or h No. Go to Par Yes. Where is	ave any legal or equitable in 2. In the property?	interest in any resi Wh	idence, building, land, or similar property? nat is the property? Check all that apply	Do not deduct secured clause the amount of any secure Creditors Who Have Claim	ed claims on Schedule D:
Do you own or h No. Go to Par Yes. Where is	ave any legal or equitable it 2.	interest in any resi Wh	idence, building, land, or similar property? nat is the property? Check all that apply Single-family home	the amount of any secure	ed claims on Schedule D:
Do you own or h No. Go to Par Yes. Where is	ave any legal or equitable is 2. In the property? In the way If available, or other description	interest in any resi Wh	idence, building, land, or similar property? nat is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount of any secure	ed claims on Schedule D:
Do you own or h No. Go to Par Yes. Where is 1.1 900 Arlen Street address,	ave any legal or equitable is 2. In the property? In the way If available, or other description CA 9494	wh [idence, building, land, or similar property? nat is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secure Creditors Who Have Clair Current value of the	ed claims on Schedule D: ms Secured by Property. Current value of the
Do you own or h No. Go to Par Yes. Where is 1.1 900 Arlen Street address,	ave any legal or equitable is 2. In the property? In the way If available, or other description CA 9494	Wh	idence, building, land, or similar property? nat is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$543,000.00 Describe the nature of y	current value of the portion you own?
Do you own or h No. Go to Par Yes. Where is 1.1 900 Arlen Street address, Novato City	ave any legal or equitable is 2. In the property? In the way If available, or other description CA 9494	wh [] [] [] [] [] [] [] [] [] [idence, building, land, or similar property? nat is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current value of the entire property? \$543,000.00 Describe the nature of y (such as fee simple, ten	current value of the portion you own? \$\frac{\text{Current value of the portion you own?}}{\text{\$0.00}}\$
Do you own or h No. Go to Par Yes. Where is 900 Arlen Street address, Novato City Marin	ave any legal or equitable is 2. In the property? In the way If available, or other description CA 9494	Wh [47-6905 IP Code [Wh [UMA [UMA	idence, building, land, or similar property? nat is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other to has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$543,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	current value of the portion you own? \$\frac{\text{Current value of the portion you own?}}{\text{\$0.00}}\$
Do you own or h No. Go to Par Yes. Where is 1.1 900 Arlen Street address, Novato City	ave any legal or equitable is 2. In the property? In the way If available, or other description CA 9494	Wh [47-6905 IP Code [Wh [UMA [UMA	idence, building, land, or similar property? nat is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other to has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$543,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Fee Simple Check if this is con	Current value of the portion you own? \$0.00 Cour ownership interest lancy by the entireties, of
No. Go to Par Yes. Where is 1.1 900 Arlen Street address, Novato City Marin	ave any legal or equitable is 2. In the property? In the way If available, or other description CA 9494	wh Wh Carry 1 Carry 1 Oth	idence, building, land, or similar property? nat is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other to has an interest in the property? Check one Debtor 1 only Debtor 2 only	current value of the entire property? \$543,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Fee Simple Check if this is con (see instructions)	Current value of the portion you own? \$0.00 Cour ownership interest lancy by the entireties, of

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debtor	· 1 <u>C</u>	hek, Thoma	s J.		Case number (if known)	18-30006
3. Cars	s, vans,	trucks, tracto	rs, sport utility veh	nicles, motorcycles		
п.						
□ N						
■ Ye	es					
		Maraadaa	Dan-		Do not deduct sec	ured claims or exemptions. Put
	Make:	Mercedes		Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	GLK-Class	<u> </u>	☐ Debtor 1 only	Creditors Who Hav	ve Claims Secured by Property.
	Year:	2014 ate mileage:	23000	Debtor 2 only	Current value of t entire property?	the Current value of the portion you own?
	Other info	•	23000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own:
Г	Other IIII	Jillalion.		At least one of the deptors and another		
				■ Check if this is community property	\$21,012	.00 \$0.00
				(see instructions)	 	
3.2	Make:	Mercedes	-Benz	Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	C-Class	-	☐ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2002		Debtor 2 only	Current value of t	, , ,
	Approxim	ate mileage:	150000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	ormation:		At least one of the debtors and another		
ſ	Debtor	's communi	ty property			
i	interes	t		■ Check if this is community property	\$1,419	.00 \$1,419.00
L				(see instructions)	·	
				n for all of your entries from Part 2, including		\$1,419.00
.you	i ilave a	itaciieu ioi Fa	irt 2. Write tilat flui	niber nere		
Part 3·	Describ	e Your Person	al and Household Ite	ams		
				erest in any of the following items?		Current value of the
•		, ,		, c		portion you own? Do not deduct secured claims or exemptions.
		goods and fur				
Exa		/lajor appliance	es, furniture, linens, o	china, kitchenware		
_						
■ Y	res. Des	cribe	Dobtor's comm	unity property interest in household go	ands and	
				luding bed, mattress, box spring, lamp		
			stands, furnitur	e, refrigerator, dishware, pots, pans, ki	itchenware,	
				etc. located at debtor's residence accor	rding to	¢2 000 00
			garage sale val	ue		\$2,000.00
	tronics					tiana, alastuania daviana
Exa				, stereo, and digital equipment; computers, printe edia players, games	ers, scanners; music collec	tions; electronic devices
			,	, , , , , , , , , , , , , , , , , , , ,		
■ Y	es. Des	cribe				
		ſ		unity property interest in misc. electro		
				uding cell phone, computer, monitor, T		
				er, speakers, microwave, clock radio, e dence according to garage sale value	etc. located	\$1,200.00
			at ueptor 5 resid	uence according to garage sale value		φι,200.00

De	ebtor 1	Chek, Thoma	as J. Case number (if known)	own) <u>18-30006</u>
8.			figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi nemorabilia, collectibles	n, or baseball card collections; other
	□No	conections, m	iemorabilia, collectibles	
	_	Describe		
	_ 100.	Describe	Debtor's community property interest in misc. collectibles including books (100), magazines (25), pictures, prints, candles, decorative items, etc. located at debtor's residence according to	
			garage sale value	\$400.00
_				
9.		ent for sports an es: Sports, photog instruments	nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools; musical
	Yes.	Describe		
			Debtor's community property interest in misc. sports and hobby equipment including golf clubs, bicycle, basketball, playing cards, board games, etc. located at debtor's residence according to garage sale value	\$600.00
_				
10.	■ No		s, shotguns, ammunition, and related equipment	
11	Clothes	•		
	Examp □ No		thes, furs, leather coats, designer wear, shoes, accessories	
	— 165.	Describe	Debtor's normal clothing located at debtor's residence according to garage sale value	\$400.00
_			<u> </u>	<u> </u>
12.	□ No Î		relry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
		2 000110011111	Debtor's community property interest in wedding ring and	
			watches (2) located at debtor's residence according to pawn shop value	\$450.00
13.	Examp ■ No	rm animals bles: Dogs, cats, b	pirds, horses	
14.	■ No	•	d household items you did not already list, including any health aids you did not list	
	☐ Yes.	Give specific info	ormation	
15			of all of your entries from Part 3, including any entries for pages you have attached liber here	for \$5,050.00
Pa	rt 4: De	scribe Your Financ	cial Assets	
			egal or equitable interest in any of the following?	Current value of the portion you own?

claims or exemptions.

De	ebtor 1	Chek, Thom	as J.			Case number (if known)	18-30006	
16.	Cash Examp □ No	oles: Money you h	ave in you	ur wallet, in your home, in a	safe deposit box, and on hand wh	nen you file your petition		
						Cash in debtor's possession		\$80.00
17.	Examp				ertificates of deposit; shares in cre	edit unions, brokerage hou	uses, and other sin	nilar
	□ No ■ Yes				Institution name:			
			17.1.	Checking Account	Debtor's community prop checking account with Ba	erty interest in ank of America		\$481.69
			17.2.	Checking Account	Debtor's community prop			\$498.38
					<u> </u>			
18.	Examp			ly traded stocks nt accounts with brokerage	firms, money market accounts			
	■ No □ Yes			Institution or issuer name	:			
19.	Non-pu joint v		ock and i	nterests in incorporated	and unincorporated businesses	s, including an interest	in an LLC, partne	ership, and
		Give specific inf	ormation	about them				
			Na	me of entity:		% of ownership:		
			LL LL		erest in ForeIncentives	50.00 %		unknown
						<u> </u>		
20.	Negotia	able instruments	include p	ersonal checks, cashiers' c	and non-negotiable instrument: hecks, promissory notes, and more someone by signing or delivering	ney orders.		
	☐ Yes.	Give specific info		bout them uer name:				
21.		nent or pension ples: Interests in I			thrift savings accounts, or other p	pension or profit-sharing	plans	
	_	List each accoun	t separate	ely.				
				of account: () or Similar Plan	Institution name: Debtor's community prop	orty intorost in		
			401(1	() Of Sillillar Flair	401k retirement account h		_	unknown
22.	Your sl Examp		deposits	you have made so that you	u may continue service or use from utilities (electric, gas, water), teleco		s, or others	
	■ No				Institution name or individual:			
23.			r a period	ic payment of money to you	ı, either for life or for a number of y	/ears)		
	■ No □ Yes	le	suer nam	e and description.				
24.				·	d ABLE program, or under a qua	alified state tuition prog	gram.	
		C. §§ 530(b)(1), 5			•			

☐ Yes Institution name	e and description. Separately file the record	s of any interests 11 LLS C 8 521(c):	
		3 of any interested in 3.5.5. 3 oz 1(o).	
<u> </u>	s in property (other than anything listed	in line 1), and rights or powers exerci	sable for your benefit
■ No□ Yes. Give specific information abo	ut them		
	ade secrets, and other intellectual properties, proceeds from royalties and licension ut them	•	
27. Licenses, franchises, and other ger Examples: Building permits, exclusive No	neral intangibles e licenses, cooperative association holdings	, liquor licenses, professional licenses	
☐ Yes. Give specific information abo	ut them		
Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you			
■ No □ Yes. Give specific information about	them, including whether you already filed t	ne returns and the tax years	
29. Family support Examples: Past due or lump sum alir No ☐ Yes. Give specific information	mony, spousal support, child support, mair	ntenance, divorce settlement, property so	ettlement
unpaid loans you made to	nsurance payments, disability benefits, sick	pay, vacation pay, workers' compensation	on, Social Security benefits;
☐ Yes. Give specific information			
31. Interests in insurance policies Examples: Health, disability, or life ins No	surance; health savings account (HSA); cre	dit, homeowner's, or renter's insurance	
Yes. Name the insurance company Compa	of each policy and list its value. ny name:	Beneficiary:	Surrender or refund value:
32. Any interest in property that is due If you are the beneficiary of a living trudied.No	you from someone who has died ust, expect proceeds from a life insurance p	olicy, or are currently entitled to receive p	roperty because someone has
☐ Yes. Give specific information			
	er or not you have filed a lawsuit or madisputes, insurance claims, or rights to sue	de a demand for payment	
Yes. Describe each claim	Debtor's community interest in	underingured motorist	
	personal injury claim against U		unknown
34. Other contingent and unliquidated ■ No □ Yes. Describe each claim	claims of every nature, including count	erclaims of the debtor and rights to se	et off claims

Debtor 1	Chek, Thomas	J.	Case number (if known)	18-30006
35. Any fii	nancial assets you d	id not already list		
■ No				
☐ Yes.	. Give specific informa	tion		
36. Add	the dollar value of al	l of your entries from Part 4, including any entries for page	es you have attached for	
		here		\$1,060.07
Part 5: De	escribe Any Business-F	Related Property You Own or Have an Interest In. List any real esta	ate in Part 1.	
37. Do you	own or have any legal	or equitable interest in any business-related property?		
_ `	to to Part 6.			
Yes.	Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accou	ınts receivable or coı	mmissions you already earned		
■ No		, ,		
☐ Yes.	. Describe			
20 Office	equipment, furnishir	and and annulae		
		computers, software, modems, printers, copiers, fax machines,	, rugs, telephones, desks, ch	airs, electronic devices
■ No				
☐ Yes.	. Describe			
40. Machi	nerv. fixtures. equip	ment, supplies you use in business, and tools of your trade	e	
■ No	,,	,, , , ,		
☐ Yes.	. Describe			
41. Invent	tory			
■ No	. Describe			
☐ res.	. Describe			
42. Interes	sts in partnerships o	r joint ventures		
	Give specific informa	ation about them		
_ 100.	. Orro opcomo imorrio	Name of entity:	% of ownership:	
		Debtor's community interest in ForeIncentives		
		LLC	50.00 %	unknown
40.6				
43. Custo	mer lists, mailing list	s, or other compilations		
	our lists include person	ally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	-			
	■ No			
	☐ Yes. Describe			
44. Any b i	usiness-related prop	erty you did not already list		
■ No				
☐ Yes.	. Give specific informat	ion		

Deb	tor 1 Chek, Thomas J.		Case number (if known)	18-30006
45.	Add the dollar value of all of your entries from Part 5, including Part 5. Write that number here			\$0.00
Part	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
46. [Oo you own or have any legal or equitable interest in any farm- o	r commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		_
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	t number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$1,419.00		
57.	Part 3: Total personal and household items, line 15	\$5,050.00		
58.	Part 4: Total financial assets, line 36	\$1,060.07		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$7,529.07	Copy personal property to	stal \$7,529.07
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$7,529.07

Fill in this information to identify your case:						
Debtor 1	Thomas J. Chek					
	First Name	Middle Name	Last Name	1		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT DIVISION	OF CALIFORNIA, SAN FRANCI	sco		
Case number	18-30006					Check if this is an
(**************************************					Ц	amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Dart 1.	Idontify the	Property You	Claim ac	Evennt
Part II	i identity the	Property You	Claim as	Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbankr	uptcy exemptions. 11	U.S.C. § 522(b)(3)						
	☐ You are claiming federal exemptions. 11 U.	S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B t	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	Mercedes-Benz	\$1,419.00		CCCP § 703.140(b)(2)					
	C-Class 2002 150000 Line from <i>Schedule A/B</i> : 3.2		100% of fair market value, up to any applicable statutory limit						
	Debtor's community property	\$2,000.00		CCCP § 703.140(b)(3)					
	interest in household goods and furnishings including bed, mattress, box spring, lamps, lamp stands, furniture, refrigerator, dishware, pots, pans, kitchenware, chairs, tables, etc. located at debtor's residence according to gar Line from Schedule A/B 6.1		100% of fair market value, up to any applicable statutory limit						
	Debtor's community property	\$1,200.00		CCCP § 703.140(b)(3)					
	interest in misc. electronic equipment including cell phone, computer, monitor, TVs, DVD player, CD player, speakers, microwave, clock radio, etc. located at debtor's residence according to garage sale value Line from Schedule A/B, 7.1		100% of fair market value, up to any applicable statutory limit						

Official Form 106C Schedule C: The Property You Claim as Exempt
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Case: 18-30006 Doc# 12 Filed: 01/15/18 Entered: 01/15/18 18:03:37 Page 8 of 34

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Schedule A/B	Check only one box for each exemption.	
Debtor's community property interest in misc. collectibles	\$400.00	o	CCCP § 703.140(b)(3)
including books (100), magazines (25), pictures, prints, candles, decorative items, etc. located at debtor's residence according to garage sale value Line from Schedule A/B. 8.1		■ 100% of fair market value, up to any applicable statutory limit	
Debtor's community property	\$600.00		CCCP § 703.140(b)(3)
interest in misc. sports and hobby equipment including golf clubs, bicycle, basketball, playing cards, board games, etc. located at debtor's residence according to garage sale value Line from Schedule A/B 9.1		100% of fair market value, up to any applicable statutory limit	
Debtor's normal clothing located at	\$400.00		CCCP § 703.140(b)(3)
debtor's residence according to garage sale value Line from Schedule A/B. 11.1		100% of fair market value, up to any applicable statutory limit	
Debtor's community property interest in wedding ring and watches	\$450.00		CCCP § 703.140(b)(4)
(2) located at debtor's residence according to pawn shop value Line from Schedule A/B. 12.1		■ 100% of fair market value, up to any applicable statutory limit	
Cash in debtor's possession Line from Schedule A/B 16.1	\$80.00		CCCP § 703.140(b)(5)
Line from Scriedule A/B. 10.1		100% of fair market value, up to any applicable statutory limit	
Debtor's community property interest in checking account with	\$481.69		CCCP § 703.140(b)(5)
Bank of America Line from Schedule A/B. 17.1		■ 100% of fair market value, up to any applicable statutory limit	
Debtor's community property interest in checking account with	\$498.38		CCCP § 703.140(b)(5)
Charles Schwab Line from Schedule A/B: 17.2		100% of fair market value, up to any applicable statutory limit	
Debtor's community property interest in 401k retirement account	Unknown		CCCP § 703.140(b)(10)(E)
held with Fidelity Line from Schedule A/B. 21.1		■ 100% of fair market value, up to any applicable statutory limit	
Debtor's community interest in underinsured motorist personal	Unknown		CCCP § 703.140(b)(11)(D),(E
injury claim against USAA Insurance Line from Schedule A/B 33.1		■ 100% of fair market value, up to any applicable statutory limit	
Debtor's community interest in underinsured motorist personal	Unknown		CCCP § 703.140(b)(11)(D),(E
injury claim against USAA Insurance Line from Schedule A/B: 33.1		100% of fair market value, up to any applicable statutory limit	

Official Form 106C Schedule C: The Property You Claim as Exempt
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Case: 18-30006 Doc# 12 Filed: 01/15/18 Entered: 01/15/18 18:03:37 Page 9 of 34

3.	e you claiming a homestead exemption of more than \$160,375? ubject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)					
	No					
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?				
		No				
		Yes				

Fill in this	information to identify yo	ur case:			
Debtor 1	Thomas J. Ch	ek			
	First Name	Middle Name Last Name		· }	
Debtor 2 (Spouse if, filin	g) First Name	Middle Name Last Name			
(0)	9)		AN EDANGIOGO		
United Stat	es Bankruptcy Court for the	NORTHERN DISTRICT OF CALIFORNIA, S. DIVISION	AN FRANCISCO		
Case numb	er 18-30006				
(if known)					if this is an
				amend	led filing
Official I	Form 106D				
Sched	ule D: Creditor	s Who Have Claims Secured	d by Propert	У	12/15
needed, copy known).		. If two married people are filing together, both are equut, number the entries, and attach it to this form. On the your property?			
`		this form to the court with your other schedules. You	have nothing else to re	port on this form.	
_	Fill in all of the information	•	3	,	
	_ist All Secured Claims	200			
		more than one secured claim, list the creditor separately	Column A	Column B	Column C
for each clair	m. If more than one creditor ha	as a particular claim, list the other creditors in Part 2. As attical order according to the creditor 's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
12.1 1	ide Park East eowners Ass.	Describe the property that secures the claim:	\$60,000.00	\$543,000.00	\$60,000.00
	r's Name	900 Arlene Way, Novato, CA 94947-6905 Debtor's Residence/Real Property			
500	Alfred Nebel Dr	Community Property As of the date you file, the claim is: Check all that			
	Alfred Nobel Dr ules, CA 94547-1838	apply. Contingent			
	r, Street, City, State & Zip Code	☐ Unliquidated			
Who owes	the debt? Check one.	■ Disputed Nature of lien. Check all that apply.			
Debtor 1		☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2		car loan)	34.04		
_	and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least o	ne of the debtors and another	☐ Judgment lien from a lawsuit			
	this claim relates to a nity debt	Other (including a right to offset) HOA Dues	•		
	December				
Date debt w	as incurred 2017	Last 4 digits of account number 4675			
2.2 Max	Kemsley	Describe the property that secures the claim:	unknown	\$543,000.00	\$0.00
	r's Name	900 Arlene Way, Novato, CA			·
	Orakes Landing Rd #	94947-6905 Debtor's Residence/Real Property Community Property			
190 Gree	nbrae, CA	As of the date you file, the claim is: Check all that			
	4-3120	apply. ☐ Contingent			
Numbe	r, Street, City, State & Zip Code	☐ Unliquidated			
		Disputed			
_	the debt? Check one.	Nature of lien. Check all that apply.	d		
Debtor 1 Debtor 2	•		cured		
	and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

Debto	or 1 Thomas J. Che	k		Case number (f know)	18-30006	
	First Name	Middle Name	Last Name			
■ At	least one of the debtors an	d another	gment lien from a lawsuit			
■ Cł	neck if this claim relates to		er (including a right to offset) Third	d Mortgage		
Date o	Dec	ember 7	Last 4 digits of account number	1513		
2.3	Select Portfolio Se	rvices Descri	be the property that secures the clai	m: \$551,128.00	\$543,000.00	\$8,128.00
	Creditor's Name	900 A	rlene Way, Novato, CA 7-6905		<u> </u>	ψο,:20.00
	10401 Deerwood Pa	Comi	or's Residence/Real Propert munity Property he date you file, the claim is: Check a			
	Jacksonville, FL 32256-5007	apply.	ntingent	ii tiet		
_	Number, Street, City, State & Z		quidated			
Who	owes the debt? Check or		e of lien. Check all that apply.			
☐ De	ebtor 1 only ebtor 2 only		agreement you made (such as mortgag r loan)	ge or secured		
_	ebtor 1 and Debtor 2 only	_	tutory lien (such as tax lien, mechanic's gment lien from a lawsuit	s lien)		
■ Cł	least one of the debtors an	_		gage		
C	ommunity debt					
Date o	Dec	ember 7	Last 4 digits of account number	2123		
<i>7</i> 4 1	Toyota Motor Cred Corp.		be the property that secures the clai	m: \$23,805.00	\$21,012.00	\$2,793.00
	Creditor's Name		Mercedes-Benz GLK-Class		· ,	. ,
	5005 N River Blvd I Cedar Rapids, IA	As of t apply.	he date you file, the claim is: Check a	II that		
_	52411-6634 Number, Street, City, State & Z		ntingent equidated			
	owes the debt? Check or	☐ Disp	•			
	ebtor 1 only ebtor 2 only		agreement you made (such as mortga r loan)	ge or secured		
□ De	ebtor 1 and Debtor 2 only		tutory lien (such as tax lien, mechanic's	s lien)		
☐ cr	least one of the debtors an neck if this claim relates to community debt		gment lien from a lawsuit er (including a right to offset) Car	Loan		
C(•					
Date o	Nov debt was incurred 201	rember 7	Last 4 digits of account number	7949		
	Trinity Financial Services, LLC	Descri	be the property that secures the clai	m: \$83,532.10	\$543,000.00	\$0.00
	Creditor's Name	900 A	Arlene Way, Novato, CA			
		Dobte	7-6905 or's Residence/Real Proper	ty		
	2618 San Miguel Di 303	Comi	munity Property			
_	2618 San Miguel Di 303 Newport Beach, CA 92660-5437 Number, Street, City, State & 2	As of t apply.	munity Property he date you file, the claim is: Check a ntingent quidated	II that		

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debto	or 1 Thomas J	l. Chek				Case number (f know)	18-30006	
	First Name	Middle N	lame	Last Name	-	, ,		
Who	owes the debt? C	heck one.	Nature of lie	en. Check all that apply.				
☐ De	btor 1 only		☐ An agreer	ment you made (such as m	nortgage or se	ecured		
☐ De	btor 2 only		car loan)					
☐ De	btor 1 and Debtor 2	? only		lien (such as tax lien, mec	hanic's lien)			
At	least one of the deb	otors and another	☐ Judgment	lien from a lawsuit				
	eck if this claim re ommunity debt	elates to a	Other (inc	luding a right to offset)	Second M	lortgage		
Date o	lebt was incurred	September 2017	Last 4	l digits of account numb	er <u>2617</u>			
2.6	Wells Fargo B	ank	Describe the	property that secures the	ne claim:	unknown	\$543,000.00	\$0.00
	Creditor's Name		900 Arlen 94947-690	e Way, Novato, CA			<u> </u>	•
				Residence/Real Pro	perty			
	PO Box 51193	1		ity Property				
	Los Angeles,		As of the data	te you file, the claim is: 0	check all that			
	90051-5493		Continger	nt				
	Number, Street, City,	State & Zip Code	Unliquida	ted				
	4 11400		Disputed					
_	owes the debt? C	heck one.	_	en. Check all that apply.				
_	btor 1 only btor 2 only		An agreer car loan)	ment you made (such as m	nortgage or se	ecured		
	btor 1 and Debtor 2	only	_ ′	lien (such as tax lien, mec	hanic's lien)			
	least one of the deb	•		: lien from a lawsuit	nanio o non			
_	eck if this claim re			luding a right to offset)				
	ommunity debt	nates to a		_				
Date o	lebt was incurred	December 2017	Last 4	I digits of account numb	er 0305			
Add th	ne dollar value of y	our entries in Co	lumn A on this	page. Write that number	here:	\$718,465.1	0	
	is the last page of that number here:	your form, add th	ne dollar value	totals from all pages.		\$718,465.1	0	
write						* -,		
Part 2	List Others t	o Be Notified fo	r a Debt That	You Already Listed				
trying than o	to collect from yo	u for a debt you o	we to someon t you listed in I	e else, list the creditor in	Part 1, and t	already listed in Part 1. Fo then list the collection ager e. If you do not have additi	cy here. Similarly, if you h	ave more
	Name, Number, S	treet, City, State &	Zip Code		On wh	nich line in Part 1 did you ente	er the creditor? 2.5	
	•	ult Services, I	nc.			•		
	17100 Gillette Irvine, CA 92				Last 4	digits of account number	<u>:617_</u>	
	Name Number S	treet, City, State &	Zin Code					
		ult Services, I	•		On wh	nich line in Part 1 did you ente	er the creditor? 2.3	
	17272 Red Hi	II Ave			Last 4	digits of account number	<u>2617 </u>	
	Irvine, CA 92	614-5628						
	Nama Number C	troot City State 9	Zin Codo					
	Spiwak & lez	treet, City, State & za LLP	Lip Code		On wh	nich line in Part 1 did you ente	er the creditor?	
	555 Marin St		-4103		Last 4	digits of account number	305_	

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 3

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Fill in this	s information to identify your c	case:				
Debtor 1	Thomas I Chak					
Deblori	Thomas J. Chek First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name	_		
(Spouse II, II	iling) Flist Name	wildule Name	Last Name			
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	COF CALIFORNIA, S	SAN FRANCISCO		
Case nun	nber 18-30006					
(if known)					☐ Che	eck if this is an
					am	ended filing
Official	Form 106E/F					
	ule E/F: Creditors W	ho Hayo Uncoc	urad Claime			12/15
	plete and accurate as possible. Use			No. 4 O. C	DIODITY I	
he Continu	s Who Have Claims Secured by Pr uation Page to this page. If you haver (if known).	e no information to report				
1. Do an	y creditors have priority unsecured	d claims against you?				
■ No	. Go to Part 2.					
☐ Ye	9					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do an	y creditors have nonpriority unsec	ured claims against you?				
	. You have nothing to report in this pa		ourt with your other sche	adules		
		art. Gubrint and form to and oc	art with your other oone	duioo.		
Ye	S.					
unsecu	Il of your nonpriority unsecured cla ured claim, list the creditor separately ne creditor holds a particular claim, li	for each claim. For each cla	im listed, identify what t	ype of claim it is. Do not list clair	ms already includ	ed in Part 1. If more
						Total claim
4.1 A	Anesthesia Consultants of	Marin Last 4 digit	s of account number	9988		\$1,077.50
	Ionpriority Creditor's Name	<u> </u>		3300	=	ψ1,077.50
•	50 D A'. D .	When was	the debt incurred?	01/04/2018		
	50 Bon Air Rd Greenbrae, CA 94904-1702					
	lumber Street City State Zlp Code	As of the d	ate you file, the claim	is: Check all that apply		
W	/ho incurred the debt? Check one.					
	Debtor 1 only	☐ Conting	ent			
	Debtor 2 only	☐ Unliquid	ated			
	Debtor 1 and Debtor 2 only	☐ Disputed	t			
	$oldsymbol{J}$ At least one of the debtors and and	other Type of NC	NPRIORITY unsecure	d claim:		
	Check if this claim is for a comm	munity	loans			
	ebt			aration agreement or divorce tha	t you did not	
	s the claim subject to offset?	<u></u> '	iority claims	a plane and other steelles 1.1.		
	No	<u></u>	·	ng plans, and other similar debts	i	
	☐ Yes	Other. S	pecify Medical Bi	IIS		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 6

California Basifia Bathalassa	Last 4 digita of account number	1120	# 00		
California Pacific Pathology Nonpriority Creditor's Name	Last 4 digits of account number		\$98		
	When was the debt incurred?	01/04/2018			
2333 Buchanan St San Francisco, CA 94115-1925					
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Medical Bi	lls			
Capital One Bank USA NA	Last 4 digits of account number	0481	\$4,219		
Nonpriority Creditor's Name	_		· , ,		
PO Box 30281	When was the debt incurred?	December 2017			
Salt Lake City, UT 84130-0281					
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
■ No	Debts to pension or profit-sharir				
Yes	Other Specify Credit card				
CEP AMERICA	Last 4 digits of account number	1128	\$102		
Nonpriority Creditor's Name		1120	Ψ102		
2100 Powell St Ste 920	When was the debt incurred?	01/04/2018			
Emeryville, CA 94608-1844 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	• ,	,			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing				
☐ Yes	Other. Specify Medical Bi	lls			

Chek, Thomas J.		Case number (f know) 18-30006			
Dr. Brian L. Strunk, MD Nonpriority Creditor's Name	Last 4 digits of account number		\$25.0		
Nonpholity Creditor's Name	When was the debt incurred?	01/04/2018			
2 Bon Air Rd					
Larkspur, CA 94939-1141 Number Street City State ZIp Code	As of the date you file, the claim	is. Chack all that apply			
Who incurred the debt? Check one.	As of the date you me, the claim	S. Offeck all triat apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Medical Bi	lls			
Dr. J. David Andrew	Last 4 digits of account number	1128	\$517.		
Nonpriority Creditor's Name			Φ317.		
	When was the debt incurred?	01/04/2018			
599 Sir Francis Drake Blvd # 208 Greenbrae. CA 94904-1731					
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.	•				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
■ No	Debts to pension or profit-sharing				
☐Yes	Other. Specify Medical Bi	lls			
Marin General Hospital	Last 4 digits of account number	1128	unknov		
Nonpriority Creditor's Name			ulikilo		
250 Bon Air Rd	When was the debt incurred?	01/04/2018			
Greenbrae, CA 94904-1702 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	no or the date you me, the claim	o. Chook an that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
No	☐ Debts to pension or profit-sharir	g plans, and other similar debts			
Yes	Other. Specify Medical Bi	lls			

Debtor	Chek, Thomas J.		Case number (if know) 18-30006				
4.8	Marin Healthcare Nonpriority Creditor's Name	Last 4 digits of account number	1128	unknown			
	100 Drakes Landing Rd Greenbrae, CA 94904-2404	When was the debt incurred?	01/04/2018				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	\square Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Medical Bi	lls				
4.9	Medical Anesthesia Consultants Nonpriority Creditor's Name	Last 4 digits of account number	1128	\$1,316.67			
	Nonpholity Orealton's Name	When was the debt incurred?	01/04/2018				
	PO Box 512107 Los Angeles, CA 90051-0107 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing	bts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical Bi	lls				
4.10	NorCal Ambulance Nonpriority Creditor's Name	Last 4 digits of account number	1128	\$2,145.85			
	6761 Sierra Ct Ste G	When was the debt incurred?	01/04/2018				
Dublin, CA 94568-2692 Number Street City State Zlp Code Who incurred the debt? Check one.		As of the date you file, the claim					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No No	Debts to pension or profit-sharing					
	☐ Yes	Other. Specify Medical Bi	I				

Debtor	Chek, Thomas J.		Case number (if know)	18-30006				
4.11	Novato Community Hospital: Sutte Health Nonpriority Creditor's Name	Last 4 digits of account number	1128	unknown				
	Nonpholity Creditor's Name	When was the debt incurred?	01/04/2018					
	180 Rowland Way							
	Novato, CA 94945-5009 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.	As of the date you me, the claim i	3. Oncor an trial apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that	t vou did not				
	Is the claim subject to offset?	report as priority claims	g	.,				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	☐ Yes	Other. Specify Medical Bil	Is					
4.12	Prima Medical Group	Last 4 digits of account number	1128	\$129.00				
	Nonpriority Creditor's Name			<u> </u>				
	599 Sir Francis Drake Blvd Ste 208	When was the debt incurred?	01/04/2018					
	Greenbrae, CA 94904-1731	•						
_	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only							
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another							
	☐ Check if this claim is for a community							
	debt Is the claim subject to offset?							
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Medical Bil	Is					
Part 3:	List Others to Be Notified About a Del	ot That You Already Listed						
is tryii have r	is page only if you have others to be notified a ng to collect from you for a debt you owe to so more than one creditor for any of the debts tha ed for any debts in Parts 1 or 2, do not fill out o	omeone else, list the original creditor in it you listed in Parts 1 or 2, list the addit	Parts 1 or 2, then list the colle	ction agency here. Similarly, if you				
	nd Address	On which entry in Part 1 or Part 2 did you	_					
	al Anesthesia Consultants		Part 1: Creditors with Priority L					
	Camino Ramon Ste 270 amon, CA 94583-4319	•	Part 2: Creditors with Nonprior	ity Unsecured Claims				
Jan K	amon, 0A 34305-4313	Last 4 digits of account number	1128					
	nd Address	On which entry in Part 1 or Part 2 did you						
	Medical Group		Part 1: Creditors with Priority U					
	wland Way Ste 100 o, CA 94945-5054	-	Part 2: Creditors with Nonprior	ity Unsecured Claims				
		Last 4 digits of account number	1128					
	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					
	na County Credit Service	Line 4.1 of (Check one):	Part 1: Creditors with Priority L	Insecured Claims				
	almer Systems, Inc. ox 1040	•	Part 2: Creditors with Nonprior	ity Unsecured Claims				
	Clara, CA 95052-1040							
		Last 4 digits of account number	9988					
Name ar	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 6

Debtor 1 Chek, Thomas J. Case number (f know) 18-30006

Sutter Health PO Box 619010 Roseville, CA 95661-9010 Line 4.11 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

1128

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	œ.	0.00
nomi art i			OD.	Ф	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	9,631.25
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	9,631.25

Fill in this infor	mation to identify your	case:		
Debtor 1	Thomas J. Chek			
	First Name	Middle Name	Last Name	}
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT DIVISION	OF CALIFORNIA, SAN FRAN	NCISCO
Case number	18-30006			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the	e contract or lease	State what the contract or lease is for
2.1			, , ,		
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	· · · · · · · · · · · · · · · · · · ·				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

					_
Fill in this	s information to identify your	case:			
Debtor 1	Thomas J. Chek				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fill	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF DIVISION	F CALIFORNIA, SA	AN FRANCISCO	
0	.h				
Case num	18-30006				☐ Check if this is an amended filing
Officia	ll Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
are filing to and numbe case numb	ogether, both are equally resp	consible for supplying corre the left. Attach the Addition question.	ect information. If nal Page to this pa	more space is needed, oge. On the top of any Ac	te as possible. If two married people copy the Additional Page, fill it out, Iditional Pages, write your name and
_					
□ No ■ Yes					
	thin the last 8 years, have you rnia, Idaho, Louisiana, Nevada,				y states and territories include Arizona,
_		,	, ,	,	
	. Go to line 3. s. Did your spouse, former spou:	oo or logal aguirelant live with	vou at the time?		
— 1 ex	s. Dia your spouse, former spou	se, or legal equivalent live with	you at the time?		
	□ No				
	Yes.				
	In which community state Sarah W. Chek 900 Arlene Way Novato, CA 94947-6 Name of your spouse, former sp Number, Street, City, State & Zi	905 ouse, or legal equivalent	CA	. Fill in the name a	and current address of that person.
line 2	lumn 1, list all of your codebto again as a codebtor only if th), Schedule E/F (Official Form	ors. Do not include your spo at person is a guarantor or	cosigner. Make s	ure you have listed the	with you. List the person shown in creditor on Schedule D (Official Formule E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedu	editor to whom you owe the debt les that apply:
	Sarah W. Chek 900 Arlene Way Novato, CA 94947-6905			■ Schedule D, □ Schedule E/ □ Schedule G Max Kemsley	F, line
	Sarah W. Chek 900 Arlene Way Novato, CA 94947-6905			■ Schedule D, □ Schedule E/l □ Schedule G	line F, line

Official Form 106H
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Case: 18-30006 Doc# 12 Filed: 01/15/18
34 Page 1 of 2 Schedule H: Your Codebtors

Entered: 01/15/18 18:03:37 Page 21 of

Select Portfolio Services

Debtor 1	Chek, Thomas J.	Case number (if known) 18-30006	
		-	
	Additional Page to List More Codebtors		
_	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:	
3.3	Sarah W. Chek 900 Arlene Way Novato, CA 94947-6905	■ Schedule D, line2.5 □ Schedule E/F, line □ Schedule G Trinity Financial Services, LLC	

Official Form 106H Schedule H: Your Codebtors Page 2 of 2 Software Copyright (c) 1996-2018 CIN Group - www.cincompass.com

Fill	in this information to identify your car	se:						
Deb	otor 1 Thomas J. C	hek			_			
	otor 2 use, if filing)				_			
Unit	ted States Bankruptcy Court for the:	NORTHERN DISTRIC FRANCISCO DIVISIO		SAN	_			
(If kn	te number 18-30006 ficial Form 106I							on chapter 13
	chedule I: Your Inco					MM / DD/ Y	YYY	
supp spou attac	s complete and accurate as possil olying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O Describe Employment	re married and not filing spouse is not filing with	g jointly, and your s n you, do not includ	spouse is le informa	living ation	g with you, includ about your spou	de information abou se. If more space is	t your needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	Debtor 2 or non-filing spouse		
	If you have more than one job,	Fundament status	☐ Employed		■ Emplo	■ Employed		
	attach a separate page with information about additional	Employment status	■ Not employed		☐ Not e	☐ Not employed		
	employers.	Occupation				Admini	strative Manager	
	Include part-time, seasonal, or self-employed work.	Employer's name			Coldwe	Coldwell Banker		
	Occupation may include student or homemaker, if it applies.	Employer's address				175 Pai Madiso	rk Ave n, NJ 07940-1123	1
		How long employed th	ere?				0 years	
unles If you	mate monthly income as of the dates you are separated. u or your non-filing spouse have more e, attach a separate sheet to this form	than one employer, comb		·	,	•	•	0 .
						For Debtor 1	For Debtor 2 or non-filing spouse	9
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$_	0.00	\$\$	18_
3.	Estimate and list monthly overting	ne pay.		3.	+\$_	0.00	+\$0.0	<u>00</u>
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$ _	0.00	\$ 2,425.48	

Official Fore CaSe: 18-30006 Doc# 12 Filed: 01/15/18 Entered: 01/15/18 18:03:37 Page 23 of page 1 34

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

\$

Combined monthly income

13.	Do you expect an	increase or	decrease	within the y	year after	you file this form?
-----	------------------	-------------	----------	--------------	------------	---------------------

No.	
Yes. Explain:	

Fill	in this informa	ation to identify you	ur ca <u>se:</u>					
	otor 1	Thomas J. C				Chec	k if this is:	
		Thomas 5. C	IICK		_		An amended filing	
	otor 2							ring postpetition chapter 13
(Spo	ouse, if filing)						expenses as of the	rollowing date.
Unit	ed States Bank	ruptcy Court for the:		HERN DISTRICT OF CALIF CISCO DIVISION	FORNIA, SAN	-	MM / DD / YYYY	
l	e number 18	8-30006						
		orm 106J						
S	chedule	J: Your E	Expen	ises				12/1
info	ormation. If m		ded, attac	If two married people are ch another sheet to this fo				
Par		ribe Your Housel	nold					
1.	Is this a join							
	■ No. Go to			to household?				
		es Debtor 2 live in	ı a separa	ite nousenoid?				
	□ Y		t file Offici	al Form 106J-2,Expenses	for Separate Househ	oldof Debtor	2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
							-	☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.		penses include		No				
		of people other the d your dependen		Yes				
exp	imate your ex		ur bankrı	y Expenses iptcy filing date unless yo is filed. If this is a supplo				
val	ue of such as	sistance and hav		povernment assistance if yed it on Schedule I: Your I			Vaur aven	
(Of	ficial Form 10	J61.)					Your exp	C113 C 3
4.		or home ownersh		ses for your residence. In lot.	clude first mortgage	4. \$		3,241.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		erty, homeowner's,	or renter's	s insurance		4a. \$ 4b. \$		<u> </u>
		e maintenance, rep				4c. \$		50.00
		eowner's association				4d. \$		380.00
5.	Additional r	mortgage payme	nts for yo	ur residence, such as hom	ne equity loans	5. \$		0.00

Official Form 106J

34

Deb	ctor 1 Chek, Thomas J.	Case num	ber (if known)	18-30006
6.	Utilities:			
٠.	6a. Electricity, heat, natural gas	6a.	\$	150.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	99.00
	6d. Other. Specify: garbage	6d.	\$	80.00
7.	Food and housekeeping supplies	 7.	\$	400.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	20.00
10.	Personal care products and services	10.	\$	40.00
	Medical and dental expenses	11.	\$	1,000.00
12.	Transportation. Include gas, maintenance, bus or train fare.		·	<u> </u>
	Do not include car payments.	12.	\$	150.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	75.00
14.	Charitable contributions and religious donations	14.	\$	20.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.		•	
	15a. Life insurance	15a.	·	0.00
	15b. Health insurance	15b.	· · · · · · · · · · · · · · · · · · ·	75.00
	15c. Vehicle insurance	15c.	·	191.00
	15d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:	47-	•	500.00
	17a. Car payments for Vehicle 1	17a.	·	502.00
	17b. Car payments for Vehicle 2	17b.	· —	0.00
	17c. Other. Specify:	17c.	·	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19	Other payments you make to support others who do not live with you.	10.	\$ ———	0.00
10.	Specify:	19.		0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedu		ır Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify:	21.	+\$	0.00
	· · · -		·	
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	6,523.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	6,523.00
23.	Calculate your monthly net income.	. -		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	7,057.27
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	6,523.00
	23c. Subtract your monthly expenses from your monthly income.		<u></u>	E24.07
	The result is your monthly net income.	23c.	\$	534.27
24.	Do you expect an increase or decrease in your expenses within the year after you For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?			ease or decrease because of a
	□ No. ■ Yes. Explain here: Unknown at this time.			
	Yes. Explain here: Unknown at this time.			

Official Form 106J

Fill in this infor	mation to identify your	case:	
Debtor 1	Thomas J. Chek		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		NORTHERN DISTRICT DIVISION	OF CALIFORNIA, SAN FRANCISCO
Case number	18-30006		
(if known)			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below						
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	No						
	Yes. Name of person			kruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)			
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							
X	/s/ Thomas J. Chek	X					
•	Thomas J. Chek Signature of Debtor 1		Signature of Debtor 2				
	Date January 15, 2018		Date				

Fill	in this inform	ation to identify you	r case:				
De	btor 1	Thomas J. Che	Middle Name	Last Name			
De	btor 2	i iist ivaille	Middle Name	Last Name			
-	ouse if, filing)	First Name	Middle Name	Last Name			
Un	ited States Ban	kruptcy Court for the:		DF CALIFORNIA, SAN FRAN	CISCO		
	se number 1	8-30006				the all if this is an	
(II K	nown)				_	heck if this is an mended filing	
Of	ficial For	m 107					
	ficial For atement		Affairs for Individ	luals Filing for B	ankruptcy	4/16	
Be a	as complete an	d accurate as possi	ble. If two married people are attach a separate sheet to the	e filing together, both are ed	qually responsible for supply		
•			arital Status and Where You	Lived Before			
1.	What is your	current marital state	us?				
	■ Married	:					
	□ Not marr	iea					
2.	During the las	st 3 years, have you	lived anywhere other than w	here you live now?			
	■ No □ Yes. List	all of the places you li	ived in the last 3 years. Do not i	nclude where you live now.			
	Debtor 1 Price	or Address:	Dates Debtor 1 I	ived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there	
3. stat			ver live with a spouse or lega ilifornia, Idaho, Louisiana, Nev				
	_	,	,,	,	-,	,	
	□ No ■ Voc Mak	ro curo vou fill out Sol	andula H. Vour Cadabtara (Offic	cial Form 106H)			
	Tes. Ivian	te sure you fill out Scr	nedule H: Your Codebtors (Offic	ciai roitti 100H).			
Pa	rt 2 Explain	the Sources of You	ır Income				
4.	Fill in the total	amount of income yo	mployment or from operating ou received from all jobs and a have income that you receive to	ll businesses, including part-t	ime activities.	ar years?	
	□ No						
	_	in the details.					
	_ 100.1111	in the details.					
			Debtor 1	0	Debtor 2	0	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
	r last calendar nuary 1 to Dec	year: :ember 31, 2017)	☐ Wages, commissions, bonuses, tips	\$-8,000.00	☐ Wages, commissions, bonuses, tips		
			Operating a business		☐ Operating a business		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r year before that: ecember 31, 2016)	☐ Wages, commissions, bonuses, tips	\$-11,493.00	☐ Wages, commissions, bonuses, tips	
		Operating a business		☐ Operating a business	
Include incor other public I you are filing	me regardless of whetl benefit payments; pen- a joint case and you h	ne during this year or the two per that income is taxable. Exampsions; rental income; interest; divided income that you received togother from each source separately	oles of other income are alimo idends; money collected from gether, list it only once under D	lawsuits; royalties; and gamblir Debtor 1.	
Yes. Fi	II in the details.				
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
For last calenda (January 1 to De	ır year: ecember 31, 2017)	Social Security Income Benefit	\$24,840.00		
		Levi Strauss Pension	\$21,600.00		
		Personal Injury Lawsuit settlement	\$5,000.00		
	r year before that: ecember 31, 2016)	Social Security Income Benefit	\$24,840.00		
		Levi Strauss Pension	\$18,831.00		
Part 3: List C	ertain Payments Yo	u Made Before You Filed for B	ankruptcy		
<u> </u>	•	2's debts primarily consumer of			
□ No. N	Neither Debtor 1 nor	Debtor 2 has primarily consure a personal, family, or household p	ner debts. Consumer debts a	are defined in 11 U.S.C. § 101(8	8) as "incurred by an
	– ~ ′	ore you filed for bankruptcy, did y	you pay any creditor a total of	\$6,425* or more?	
		each creditor to whom you paid			
	payments	Do not include payments for dom to an attorney for this bankruptcy nt on 4/01/19 and every 3 years a	y case.	• •	y. Also, do not include

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you paid

still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	Cliek, Hiolilas J.			oc Humber (# known)	10-30000
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Select Portfolio Services 10401 Deerwood Park Blvd Jacksonville, FL 32256-5007	November 2017; December 2017; January 2018	\$9,723.00	\$551,128.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
	Toyota Motor Credit Corp. 5005 N River Blvd NE Cedar Rapids, IA 52411-6634	October 2017; November 2017; December 2017	\$1,506.00	\$23,805.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Within 1 year before you filed for bankruptour Insiders include your relatives; any general part which you are an officer, director, person in corbusiness you operate as a sole proprietor. 11 U No Yes, List all payments to an insider.	tners; relatives of any genera ntrol, or owner of 20% or mo	al partners; partnersh re of their voting secu	ps of which you are irities; and any man	a general partner; corporations of aging agent, including one for a
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or cosig No Yes. List all payments to an insider				count of a debt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures	P		
Part		·	v laweuit court act		
	Within 1 year before you filed for bankrupte List all such matters, including personal injury of and contract disputes. No Yes. Fill in the details.				
	List all such matters, including personal injury of and contract disputes.			uits, paternity action	
	List all such matters, including personal injury of and contract disputes. No Yes. Fill in the details. Case title	cases, small claims actions,	divorces, collection s	uits, paternity action	ns, support or custody modifications,

Official Form 107

10.	Within 1 year before you filed for bankruptcy, we Check all that apply and fill in the details below.	ras any of your property repossessed, foreclosed,	garnished, attached,	seized, or levied?			
	No. Go to line 11.Yes. Fill in the information below.						
	Creditor Name and Address De	escribe the Property	Date	Value of the			
	Ex	xplain what happened		property			
11.	Within 90 days before you filed for bankruptcy, accounts or refuse to make a payment because ■ No □ Yes. Fill in the details.	did any creditor, including a bank or financial insti you owed a debt?	tution, set off any ar	nounts from your			
	Creditor Name and Address De	escribe the action the creditor took	Date action was taken	Amount			
12.	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 						
Par	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution.						
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses						
	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?						
	■ No □ Yes. Fill in the details.						
	how the loss occurred Includ	ribe any insurance coverage for the loss le the amount that insurance has paid. List pending	Date of your loss	Value of property lost			
		ance claims on line 33 of Schedule A/B: Property.					
Par	t 7: List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.						
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

Case number (if known) 18-30006

Official Form 107

Debtor 1 Chek, Thomas J.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1 Chek, Thomas J.				_ (Case num	nber (if known)	18-30006	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and v transferred	/alue of a	ny prop	erty		payment or er was	Amount of payment
	The Marne Law Group 30 North San Pedro Road Suite 195 San Rafael, CA 94903		No payment ye	t receiv	ed		N/A		\$0.00
	Incharge Debt Solutions 5750 Major Blvd # 300 Orlando, FL 32819-7971 www.personalfinanceeducation.com		Mandatory Pre Counseling/\$2	-Filing (5.00	Credit		01/04	./2018	\$25.00
17.	 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No								
	Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value transferred	alue of a	iny prop	erty		payment or er was	Amount of payment
	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address Person's relationship to you		Description and v property transfer			paym	ribe any prop ents receive n exchange		Date transfer was made
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust		Description and	alue of t	he prope	erty trans	ferred		Date Transfer was made
				_					made
Par	t 8: List of Certain Financial Accounts, Inst	trume	ents, Safe Deposit	Boxes, a	nd Stora	ge Units			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		4 digits of ount number	Type of instrur	of accour ment	nt or	Date account closed, so moved, or transferred	ld,	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution		Who else had acc	2055 to it	2 1	Describe	the contents		Do you still
	Address (Number, Street, City, State and ZIP Code)		Address (Number, S and ZIP Code)			Desci ID6	are contents		Do you still have it?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	tor 1	Chek, Thomas J.		Case number (if known)	18-30006			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
		No						
		Yes. Fill in the details.						
		e of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State	Describe the contents	i	Do you still have it?		
			and ZIP Code)					
Part	t 9:	Identify Property You Hold or Control for S	Someone Else					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.							
		No						
		Yes. Fill in the details.						
		er's Name ress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property		Value		
Par	t 10:	Give Details About Environmental Information	tion					
For t	he pu	rpose of Part 10, the following definitions a	pply:					
_								
	toxic	onmental law means any federal, state, or los substances, wastes, or material into the air olling the cleanup of these substances, was	, land, soil, surface water, ground					
		neans any location, facility, or property as doperate, or utilize it, including disposal site	-	aw, whether you now ov	vn, operate, or	utilize it or used to		
	Haza	rdous material means anything an environmrial, pollutant, contaminant, or similar term.		waste, hazardous subst	ance, toxic sub	stance, hazardous		
		•		4b				
-		notices, releases, and proceedings that you		•				
24.	Has a	iny governmental unit notified you that you	may be liable or potentially liable	under or in violation of	an environmen	tal law?		
		No						
		Yes. Fill in the details.						
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental lav	, if you	Date of notice		
25.	Have	Have you notified any governmental unit of any release of hazardous material?						
	_							
	_	No Yes. Fill in the details.						
		e of site	Governmental unit	Environmental lav	v if vou	Date of notice		
		ress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)		,, ii you	Date of Hotioc		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	■ No							
		Yes. Fill in the details.						
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case		Status of the case		
Par	t 11:	Give Details About Your Business or Conn	,					
27	7. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?					usiness?		
-1.		• • •	oprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	'							
Offici	al Form	A member of a limited liability company (LLC) or limited liability partnershi			nage		

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Deb	otor 1	Chek, Thomas J.		Case number (if known) 18-30006				
	[☐ A partner in a partnership						
	[☐ An officer, director, or managing executive of a corporation						
	[☐ An owner of at least 5% of the voting or equity securities of a corporation						
		No. None of the above applies. Go to Part 12.						
	= y	Yes. Check all that apply above and fill						
	Business Name Address (Number, Street, City, State and ZIP Code)		Describe the nature of the business	Employer Identification number				
			Name of accountant or bookkeeper	Do not include Social Security number or ITIN.				
				Dates business existed				
	ForeIncentives 900 Arlene Way		Sales agent to solicit new business	EIN: 59-3830221				
		ato, CA 94947-6905	business	From-To				
	·		David Rasonsky Rasonsky Financial Services					
	■ \		Date Issued					
	Address (Number, Street, City, State and ZIP Code)							
	1050	id Rasonsky 0 Northgate Dr Ste 190 Rafael, CA 94903-2539	Tax time both years	_				
Par	t 12:	Sign Below						
true banl 18 U	and co kruptcy	orrect. I understand that making a false		declare under penalty of perjury that the answers are ining money or property by fraud in connection with a both.				
		J. Chek	Signature of Debtor 2					
Sig	nature	e of Debtor 1						
Dat	e <u>Ja</u>	anuary 15, 2018	Date					
Did : ■ N □ Y	lo	tach additional pages to Your Statemer	nt of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?				
■ N	lo		an attorney to help you fill out bankrupto					

Official Form 107